		ORDER FO	R SUPP	LIES OR S	ERVIC	CES				PAG	E I OF
1 CONTRACT/PURCH ORDE	R/	2. DELIVERY ORDER	/CALL NO.	3. DATE OF ORDE	ER/CALL	4 REQ / PU	RCH, REQU	JEST NO.		5. PRIORIT	Y
DAKF11-99-D-0005-		0064		2001Sep28		MIPR1M	-ACCB-B	075		}	
6. ISSUED BY	CO	DE DAKF11	7. A	DMINISTERED	BY		C	ODE			
ARMY ATLANTA CONT										I —	ERY FOB
INSTALLATION, LOGIS	STICS, & ENVI	RONMENTAL	}	SEE ITEM	6					IX DE	EST THER
1309 ANDERSON WAY			ļ								
FORT MCPHERSON G	A 30330-1096	5	}							(See Sch	edule if other)
			}							1	1
9. CONTRACTOR	CO	DE 6G280		FACILITY	T	10. DE		FOB POINT BY	(Date)	1	IF BUSINESS IS
STANLEY ASSOCIATE	SINC		· ·			12. DI	SEE 5	SCHEDULE ERMS		→ ⊔	ALL.
RALPH I, SEBACHER 300 N WASHINGTON S	STREET					Net 30	Days				ALL ADVANTAGED MEN-OWNED
SUITE 400 ALEXANDRIA VA 2231	4-2121					13. M	AIL INV	OICES TO TH	IE AD	DRESS IN B	LOCK
						See	Schedule	•			
14. SHIP TO	col	DE W8101P		PAYMENT WILL			CODE	S91533		_	
USAREUR & 7TH ARM				AFACEUR/KAIS IT 23122	ERSLAU"	TERN, GE	RMANY			1	IARK ALL
DOUGL, PRATT/ODS ODCSLOG AELAD SR			1	ISERSLAUTERI	N APO 09	227 GER	MANY			PACKAGES AND PAPERS WITH	
UNIT 29351 09014 GE	ERMANY		1								NTIFICATION IMBERS IN
			1							BLO	CKS 1 AND 2.
	X This delivery	order/call is issued on and	ther Govt, ager	ncy or in accordance w	rith and subject	et to terms and	conditions of	f above numbered	l contrac	 t.	
OF DUDCHASE	Reference ye	our quote dated						Furnish the fo	llowing	on terms specifi	ed herein.
ORDER PURCHASE	ACCEPTA	ANCE. THE CONTR.	ACTOR HE	REBY ACCEPTS	THE OFF	ER REPRE	SENTED	BY THE NUI	MBER	ED PURCHA	SE
		DITIONS SET FOR					JJECT TO	MEE OF TH	LILI	IVIO	
 		<u> </u>									
NAME OF CONTRACTOR SIG			SIGNATI	NATURE TYPED NAME AN				AME AND TI	TLE		DATE SIGNED (YYYYMMMDD)
If this box is marked	, supplier must :	sign Acceptance and	return the fo	llowing number o	of copies:						
17. ACCOUNTING AND	APPROPRIAT	ION DATA/ LOCAL	USE					·			
See Schedule											
18. ITEM NO. 19.		SCHEDULE OF SU	RVICES	,	20. QUANTITY				************		
)						ORDERED/ ACCEPTED*		21. UNIT 22. U		NIT PRICE	23 AMOUNT
	SEE	SCHEDL	E								
	JLL '	SCHEDE	/ L L					_			li:
* If quantity accepted by the Gov quatity ordered, indicate by X. If		2	4 UNITED	anne d	ERICA				_	TOTAL.	\$449,833.39
quantity accepted below quantity		le E	BY: MARY A	NNE OSBORN	C	ONTRACTING	G/ORDERI	NG OFFICER	29 Di). IFFERENCES	
26. QUANTITY IN COLU	JMN 20 HAS B	BEN			27. SHIP	NO.	28. DO V	OUCHER N). VITIALS	
INSPECTED 1	RECEIVED	ACCEPTED, AN CONTRACT EX			1 7 70	RTIAL	32. PAIL	BY	_	3. AMOUNT	VERIFIED
		CONTRACTEX	CLITASI	OLED		NAL			C	ORRECT FO)R
DATE	SIGNAT	URE OF AUTHORIZ	ED GOVT.	REP.	31. PAY	MENT	1		1,	4. CHECK N	IMPED
36. I certify this account is	correct and pro	per for payment.				OMPLETE			3	4, UHEUK N	UNDEK
DATE SIGNATURE AND TITLE OF CERT				NG OFFICER	ARTIAL NAL			3	35. BILL OF LADING NO.		
37. RECEIVED AT	38. RECEIVE	ED BY		RECEIVED	40. TOTA		41. S/R	ACCOUNT N	O. 4	2. S/R VOUC	CHER NO.
			(444	(YMMMDD)	CON	TAINERS					

This is a cost plus fixed fee task order to support the USAREUR Migration of IMMS to a Web-based solution. Task order includes logistical areas 1, 2, 4 and 8. Tasks 1, 2 and 8 are performed at Contractors sites and other locations as designated by Government. Task 4 is to be performed at the BASOPS in Wuerzburg, Germany. Services will be performed at contractor's facility with travel to Government site.

PERFORMANCE PERIODS:

PERIOD	DATES	
Base Period	28 Sep 2001 – 27 Sep 2002	

3. OBLIGATED FUND RECAP:

See Section G.

4. INVOICING INSTRUCTIONS:

- a. The contractor shall submit **original** copy of invoice [SF 1034] Public Voucher for Purchases and Services, through their **cognizant DCAA** to the Contracting Officer at address in Block 6.
- b. Submit one "copy" of the SF 1034 to the primary task order monitor as identified in the performance Work Statement. Invoices shall not be submitted more often than once every two weeks.

Cost plus fixed fee award vouchers shall be submitted pursuant to FAR 52.216-7, and shall, as a minimum, include the following documentation.

- a. The total price for the current billing period and the cumulative billed for the current fiscal year. These costs shall be shown by CLIN or sub-CLIN level.
- b. Include supporting documentation, by CLIN, for amounts invoiced. Supporting documentation must be broke-out in detail to substantiate the total amount requested for reimbursement.
- c. Travel costs shall be broken out by occurrence, with itinerary, dates of travel, number and category of employee travel, per diem costs, transportation costs. Include the government approval with supporting documentation. Travel shall be in accordance with FAR part 31.205-46 and per diem rates will be in accordance with the Joint Travel Regulation.
- d. The contractor shall submit proposed final indirect cost rates and completion [FINAL] voucher in accordance with FAR 52.216-7 and the instructions contained in award at G.3, paragraph B.
- e. **The task order monitor** will send the Contracting Officer of the Invoice Review and Approval (attachment 10 of the Ordering Guide) at address in Block 6 via fastest method within five days of receipt. The Contracting Officer will certify services on SF 1034 and send to the paying office within the allowable timeframe established in the Prompt Payment Act as amended.